Preventing Sexual Coercion Among Adolescents (Part II)

Satellite Conference Thursday, March 18, 2004 2:00-4:00 p.m., Central Time

Produced by the Alabama Department of Public Health
Video Communications Division

Faculty

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Objectives

- · Cite current state laws
- Outline specific counseling techniques
- Develop a work plan for integrating counseling

Preventing Adolescent Sexual Coercion: Intro to Part II

- Now that you know about adolescent sexual coercion: what, how, why
- Now that you know you are required to counsel minors to resist coercion
- Now that you know you are required to encourage family participation in seeking services

Preventing Adolescent Sexual Coercion: Intro Part II (continued)

- · What does the law say?
- How do I counsel?
- How can I work all this into our busy clinic?

Alabama: WHO MUST REPORT:

 Hospitals, clinics, sanitariums, physicians, surgeons, medical examiners, coroners, dentists, osteopaths, optometrists, chiropractors, podiatrists, nurses, school teachers, and officials;

Alabama WHO MUST REPORT:

(continued)

- Peace officers, law enforcement officials, pharmacists, social workers, day-care workers or employees, mental health professionals;
- Any other person called upon to render aid or medical assistance to any child

Alabama: Reporting Circumstances

 When the child is known or suspected to be a victim of child abuse or neglect

Alabama: Privileged Communications

Ala. Code § 26-14-10 (1992)
 The doctrine of privileged communication, with the exception of the attorney-client privilege, shall not be a ground for excluding any evidence regarding a child's injuries or the case thereof in any judicial proceeding resulting from a report pursuant to this chapter.

Struggling with Law and Practice

- · Reporting partners of teens due to age
- Will the patient return for medical care?
- · Several states are struggling

Struggling with Law and Practice

- Florida has a statute, FS 827.03(3), health care professionals working with pregnant teens may determine reporting would interfere with the provision of medical services
- October 2003: Kansas health care workers file a class action suit to bar reporting of sexual activity of persons under 16 years old as evidence of child abuse

Preventing Adolescent Sexual Coercion

Counseling
Family Participation
Community Resources
Developing a Work Plan

Resisting Sexual Coercion

- Handouts
- · Questions to ask
- · Counseling techniques
- · Types of coercive tactics
- Strategies an adolescent can employ
- · Pressure lines
- · General counseling skills

Counseling To Help Resist Sexual Coercion

Going for a R.I.D.E.

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 yifdietn identify
 Idae deal
 eerxopl explore

Healthy Relationships

- No power differentials
- · A balance between give and take
- · Time to develop
- Respect

Counseling Family Participation

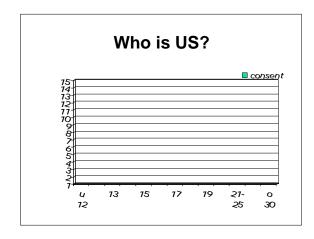
- Examine own family history, culture, sexual education.
- When did you discuss sex with your parents?
- How and when did you discuss sex with your own children?
- · What is a family's comfort level?
- Address fears and practice with patient.

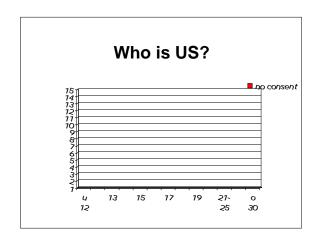
Elements Of A Clinic Work-Plan

- · SAFETY of the minor
- CONTINUED ACCESS to health care
- REPORTING REQUIREMENTS and steps to take
- LOGISTICS FOR COUNSELING about sexual coercion and family planning
- DOCUMENTATION
- PARENTAL NOTIFICATION under what circumstances? Rights of the minor.

First Intercourse? Coerced?

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Alabama State Laws on Child Maltreatment and Reporting

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1st Degree Rape §13A-6-61

- CLASS A FELONY, 10-99 YEARS
- Sexual intercourse with someone under age 12
- Sexual intercourse by forcible compulsion
- Sexual intercourse with one incapable of consent

2nd Degree Rape §13A-6-62

- CLASS B FELONY, 2-20 YEARS
- Sexual intercourse with someone between the ages of 12-16, when actor is at least two years older

1st Degree Sodomy §13A-6-63

CLASS A FELONY, 10-99 YEARS

- Deviate sexual intercourse with someone under age 12
- Deviate sexual intercourse by forcible compulsion
- Deviate sexual intercourse with one incapable of consent

2nd Degree Sodomy §13A-6-64

CLASS B FELONY, 2-20 YEARS

• Deviate sexual intercourse with someone between the ages of 12-16

Sexual Torture §13A-6-65.1

CLASS A FELONY, 10-99 YEARS

- Penetrating vagina or anus with inanimate object by forcible compulsion
- Penetrating vagina or anus of one who is under age 12
- Penetrating vagina or anus of one incapable of consent

1st Degree Sexual Abuse §13A-6-66

CLASS C FELONY, 1-10 YEARS

- Sexual contact with one less than age 12
- Sexual contact by forcible compulsion
- Sexual contact with one incapable of consent

2nd Degree Sexual Abuse §13A-6-67

CLASS A MISDEMEANOR, UP TO 1 YEAR

 Sexual contact by an adult with one who is between 12 and 16 years old

Sexual Misconduct §13A-6-65

CLASS A MISDEMEANOR, UP TO 1 YEAR

- Male Sexual intercourse with female with consent obtained by fraud
- Female Sexual intercourse with male without his consent

Incest §13A-6-68

CLASS C FELONY, 1-10 YEARS

- Marries or engages in sexual intercourse with:
- Ancestor or descendant by blood or adoption
- Brother or sister, whole, half or adopted
- Stepchild or stepparent while the marriage creating relationship exists
- · Aunt, uncle, niece or nephew

Indecent Exposure §13A-6-68

CLASS A MISDEMEANOR, UP TO 1 YEAR

 Exposing genitals with intent to arouse or gratify sexual desire of himself or another person, other than his spouse

1st Degree Domestic Violence §13A-6-130

CLASS A FELONY, 10-99 YEARS

 Causing serious physical injury by use of a deadly weapon on current or former spouse, parent, child, any person with whom defendant has child in common, a present or former household member, or a person with whom defendant has dating or engagement relationship

2nd Degree Domestic Violence §13A-6-131

CLASS B FELONY, 2-20 YEARS

 Intentionally causing serious physical injury (w/o deadly weapon) or recklessly causing serious physical injury by use of a deadly weapon on current or former spouse, parent, child, any person with whom defendant has child in common, a present or former household member, or a person with whom defendant has dating or engagement relationship

Endangering Welfare of Child §13A-13-6

CLASS A MISDEMEANOR. UP TO 1 YEAR

- Directing a child to engage in an occupation involving a substantial risk of danger to his life or health
- Failure to exercise reasonable diligence in controlling child to prevent him or her from becoming a delinquent child

Abandonment of Child §13-13A-5

CLASS A MISDEMEANOR, UP TO 1 YEAR

 A parent or guardian who deserts child in a place with intent to wholly abandon it.

Child Molestation, Enticement §13A-6-69

CLASS B FELONY, MINIMUM OF 2 – NOT MORE THAN 10 YEARS

 Unlawful for one to with lascivious intent entice, allure, persuade or invite any child to enter any vehicle, room, house, office or other place for the purpose of proposing an act of sexual intercourse or for the purpose of the fondling or feeling of the sexual or genital parts of such a child.

Child Solicitation by Computer §13A-6-110

CLASS B FELONY, 2-20 YEARS

 Enticing, inducing, persuading, seducing, prevailing, advising, coercing ordering by means of a computer a child to meet with defendant or any other purpose for the purpose of unlawful sexual activity.

Child Abuse §26-15-3

CLASS C FELONY, 1-10 YEARS

 Willfully abusing, cruelly beating or willfully maltreating any child by a responsible person.

Reporting Responsibilities and Procedures

- The Child Abuse Reporting Act, Ala. Code § 26-14-1 et seq.
- The Child Abuse Prevention and Treatment Act, 42 U.S.C. § 5101 et seq.

What to Report

- Abuse: Harm or threatened harm to a child's health or welfare. Includes nonaccidental physical or mental injury, sexual abuse, exploitation, enticement.
- Neglect:Negligent treatment or maltreatment of a child, including the failure to provide adequate food, medical treatment, supervision, clothing or shelter.

To Whom To Report

- · Law enforcement
- Department of Human Resources

Who Must Report

 Hospitals, clinics, doctors, physicians, surgeons, medical examiners, coroners, dentists, osteopaths, optometrists, chiropractors, podiatrists, nurses, school teachers and officials, peace officers, law enforcement officials, pharmacists, social workers, day care workers or employees, mental health professionals, members of the clergy, any person called upon to render aid or medical assistance to any child while child is known or suspected to be a victim of child abuse, neglect. § 26-14-3

Who May Report

 Any person who has reasonable cause to suspect that a child is being abused or neglected.

How To Report

- Immediately by telephone or other direct communication. § 26-14-3
- Follow up by written report. § 26-14-3

Contents of Reports

- Direct communication report must state, if known:
- The name of the child, and his whereabouts
- The names and addresses of the parents, guardian or caretaker; and
- The character and extent of his injuries

Written Report Must Also Contain

- Any evidence of previous injuries to said child
- Any other pertinent information which might establish the cause of such injury or injuries; and
- The identity of the person or persons responsible for the same

Doctrine of Privileged Communications §26-14-5

 The doctrine of privileged communications, with the exception of the attorney-client privilege, shall not be a ground for excluding any evidence regarding a child's injuries or the cause thereof in any judicial proceeding resulting from a report pursuant to this chapter. § 26-14-10

Immunity

 Persons who in good faith report suspected instances of abuse or neglect to DHR are immune from civil and criminal liability. § 26-14-10

Other Upcoming Programs:

Chemical Risk Assessment

Tuesday, March 30, 2004 12:00-1:30 p.m., Central Time

Reproductive Health Issues for Women Over 40

Wednesday, April 14, 2004 2:00-4:00 p.m., Central Time

Other Upcoming Programs:

Obesity in Adolescents and Adults

Wednesday, April 21, 2004 2:00-4:00 p.m., Central Time

For a complete listing of programs, visit our website: www.adph.org/alphtn